



**Commonwealth of Massachusetts**  
**OFFICE OF CONSUMER AFFAIRS**  
**DIVISION OF PROFESSIONAL LICENSURE**  
**Office of Investigation**  
239 Causeway Street, Suite 400  
Boston, Massachusetts 02114

**Deval Patrick**  
GOVERNOR  
**Tim Murray**  
LIEUTENANT GOVERNOR  
**Daniel Crane**  
DIRECTOR, OFFICE OF  
CONSUMER AFFAIRS AND  
BUSINESS REGULATION  
**George Weber**  
DIRECTOR, DIVISION OF  
PROFESSIONAL LICENSURE

**Board of Barbers**

**No Plumbing or Electrical Work Required Form**

DATE: \_\_\_\_\_

**This is to certify that all electrical and/or plumbing work on these premises complies with the rules and regulations of local and state electrical and plumbing codes. There have been no changes in electrical and/or plumbing. No changes will take place without first notifying the Barber board and proper forms are obtained and completed.**

\_\_\_\_\_  
NAME OF SHOP

\_\_\_\_\_  
NAME OF SHOP OWNER

\_\_\_\_\_  
ADDRESS OF SHOP

\_\_\_\_\_  
TELEPHONE NUMBER

\_\_\_\_\_  
SIGNATURE OF SHOP OWNER

